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Bib Data Sheet

CONFIRMATION NO. 6442

SERIAL NUMBER 10/736,994	FILING DATE 12/15/2003  RULE	CLASS 607	GROUP ART UNIT 3766	ATTORNEY DOCKET NO. 2C03.1-332
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/457,857 06/10/2003  
which claims benefit of 60/388,577 06/13/2002

OK Btz 3/8/06

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

none Btz 3/8/06

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/08/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 8	TOTAL CLAIMS 52	INDEPENDENT CLAIMS 10
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Barbara Boden</i> Initials <i>Btz</i>				

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## TITLE

Method and apparatus for performing microcurrent stimulation (MSC) therapy

FILING FEE  RECEIVED 3920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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